



Stephenville Police Department



Release of Information

I, _____ do hereby release any and all information regarding my criminal history held by the Stephenville Police Department. My identifiers are as follows:

Name: _____

Date of Birth: _____

Driver's License: _____

Social Security #: _____

Requester

If you are not making this request in person, you MUST sign in front of a Notary.

This document has been subscribed and affirmed before me in the County of _____, State of _____, this _____ day of _____, 20__

My Commission expires: _____

